

LOUISIANA BOARD OF ETHICS

Post Office Box 4368

Baton Rouge, Louisiana 70821

TIER 2.1 PERSONAL FINANCIAL DISCLOSURE STATEMENTTHIS REPORT COVERS CALENDAR YEAR: 2011☒ ORIGINAL REPORT☐ AMENDED REPORT☐ I currently hold an office that would require me to file a Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE E.Name of Filer (print full name) Bill BubrigAddress 8748 Hwy. 23City, State, Zip Belle Chasse, LA 70037Name of Board/Commission (no abbreviations): Regional Planning CommissionDate of Appointment: 2009Date Appointment Expires: N/AName of Spouse (print full name) Gena BubrigSpouse's Occupation SecretaryPrincipal Business Address 8748 Hwy. 23City, State, Zip Belle Chasse, LA 70037**CHECK ONE:**☒ Neither I, nor any member of my immediate family, have a personal or financial interest in any entity, contract, or business, or a personal or financial relationship, that in any way poses a conflict of interest, which would affect the impartial performance of my duties.☐ I have attached a statement describing any conflicts, and actions I am taking to resolve or avoid the conflicts.

Check all that apply:

☐ I have filed my state income tax return for the previous year.☒ I have filed for an extension of my state income tax return for the previous year.☐ I have filed my federal income tax return for the previous year.☒ I have filed for an extension of my federal income tax return for the previous year.

NOTE: La. R.S. 42:1124.2.1 does not provide you the opportunity to request an extension in filing your personal financial disclosure statement.

Certification of Accuracy

I do hereby certify that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge and belief.


Signature of Filer

LOUISIANA BOARD OF ETHICSPost Office Box 4368
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<input checked="" type="checkbox"/> Filer	<input type="checkbox"/> Spouse	<input checked="" type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time
Name of Employer: <u>Bubrig Insurance Agency, Ltd.</u>			
Job Title: <u>President</u>			
Job Description: <u>Insurance Agent</u>			

<input type="checkbox"/> Filer	<input checked="" type="checkbox"/> Spouse	<input type="checkbox"/> Full-Time	<input checked="" type="checkbox"/> Part-Time
Name of Employer: <u>Bubrig Insurance Agency, Ltd.</u>			
Job Title: <u>Secretary</u>			
Job Description: <u>Secretary</u>			

<input checked="" type="checkbox"/> Filer	<input type="checkbox"/> Spouse	<input checked="" type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time
Name of Employer: <u>Prudential Insurance Co.</u>			
Job Title: <u>Insurance Sales</u>			
Job Description: <u> </u>			

<input checked="" type="checkbox"/> Filer	<input type="checkbox"/> Spouse	<input type="checkbox"/> Full-Time	<input checked="" type="checkbox"/> Part-Time
Name of Employer: <u>Empire / Venice Inn, LLC</u>			
Job Title: <u>Manager</u>			
Job Description: <u>Manager - Motel Operations</u>			

- You are required to disclose on SCHEDULE A employment information related to both you and your spouse.
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
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☐ Filer ☐ Spouse ☒ Business (where amount of interest exceeds 10%)
 Type of Income: ☐ State ☒ Political Subdivision ☐ Gaming Interest
 Name of Business (if applicable): Plaquemines Parish Sheriff's Office
 Name of Income Source: Insurance Sales / Commissions
 Address: 301 Main Street
 City, State, Zip: Belle Chasse, LA 70037
 Amount of Income (exact dollar amount): \$ 51,000

☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)
 Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest
 Name of Business (if applicable): _____
 Name of Income Source: _____
 Address: _____
 City, State, Zip: _____
 Amount of Income (exact dollar amount): \$ _____

☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)
 Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest
 Name of Business (if applicable): _____
 Name of Income Source: _____
 Address: _____
 City, State, Zip: _____
 Amount of Income (exact dollar amount): \$ _____

☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)
 Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest
 Name of Business (if applicable): _____
 Name of Income Source: _____
 Address: _____
 City, State, Zip: _____
 Amount of Income (exact dollar amount): \$ _____

* You are required to complete SCHEDULE B if you or your spouse received income from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

**Income* (for a business) means gross income less costs of goods sold, and operating expenses.

* Income* (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

* The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
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☒ Filer ☐ Spouse ☐ Both
Amount of Interest (amount exceeds 10%): 100 %
Name of Business: Bubrig Insurance Agency, Ltd.
Address: 8748 Hwy. 23
City, State, Zip: Belle Chasse, LA 70037
Business Description: Insurance Agency
Nature of Association: Owner

☐ Filer ☐ Spouse ☐ Both
Amount of Interest (amount exceeds 10%): _____ %
Name of Business: _____
Address: _____
City, State, Zip: _____
Business Description: _____
Nature of Association: _____

☐ Filer ☐ Spouse ☐ Both
Amount of Interest (amount exceeds 10%): _____ %
Name of Business: _____
Address: _____
City, State, Zip: _____
Business Description: _____
Nature of Association: _____

☐ Filer ☐ Spouse ☐ Both
Amount of Interest (amount exceeds 10%): _____ %
Name of Business: _____
Address: _____
City, State, Zip: _____
Business Description: _____
Nature of Association: _____

* You are required to complete SCHEDULE C if you or your spouse is a director, officer, owner, partner, member, or trustee of a business and if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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<input checked="" type="checkbox"/> Filer	<input type="checkbox"/> Spouse
Name of Organization: <u>OLPH Church</u>	
Address: <u>8968 Hwy. 23</u>	
City, State, Zip: <u>Belle Chasse, LA 70037</u>	
Nature of Association: <u>Church</u>	
Description of Organization: <u>Finance Council Member</u>	

<input checked="" type="checkbox"/> Filer	<input type="checkbox"/> Spouse
Name of Organization: <u>Belle Chasse Rotary Club</u>	
Address: <u>P.O. Box 844</u>	
City, State, Zip: <u>Belle Chasse, LA 70037</u>	
Nature of Association: <u>Civic Association</u>	
Description of Organization: <u>Rotary Club</u>	

<input type="checkbox"/> Filer	<input type="checkbox"/> Spouse
Name of Organization: _____	
Address: _____	
City, State, Zip: _____	
Nature of Association: _____	
Description of Organization: _____	

<input type="checkbox"/> Filer	<input type="checkbox"/> Spouse
Name of Organization: _____	
Address: _____	
City, State, Zip: _____	
Nature of Association: _____	
Description of Organization: _____	

*You are required to complete SCHEDULE D if you or your spouse is a director or officer of a nonprofit agency.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
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Name of Office/Position: _____

Name of Office/Position: _____

Name of Office/Position: _____

Name of Office/Position: _____

Name of Office/Position: _____

Name of Office/Position: _____

Name of Office/Position: _____

*You are required to complete SCHEDULE E if you hold any other office or position which would require you to file a personal financial disclosure statement under Section 1124.3.

* "Public Office" means any state, parish, municipal, ward, district, or other office or position that is filled by election of the voters.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
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Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

* You are required to complete SCHEDULE F if you are appointed to a state board or commission and subject to annual financial statements as required by 42:1224.2.1 and you made a contribution in excess of \$1,000 to the campaign of the official who appointed you.

* You are only required to disclose contributions or loans made within one year of appointment.

* "Candidate" means a person who seeks nomination or election to public office, except the office of president or vice president of the United States, presidential elector, delegate to a political party convention, United States senator, United States congressman, or political party office.

* "Public Office" means any state, parish, municipal, ward, district, or other office or position that is filled by election of the voters, except the president or vice president of the United States, presidential elector, delegate to the political party convention, U.S. Senator, U.S. Congressman, or a political party office.

* "Contribution" means a gift, conveyance, payment, or deposit of money or anything of value, or the forgiveness of a loan or of a debt, made for the purpose of supporting, opposing, or otherwise influencing the nomination or election of a person to public office, whether made before or after the election.

* "Loan" means a transfer of money, property, or anything of value in exchange for obligation to repay in whole or in part, made for the purpose of supporting, opposing, or otherwise influencing the nomination for election, or election, of any person to public office.